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COMMISSIONER FOR PATENTS
 UNITED STATES PATENT AND TRADEMARK OFFICE
 WASHINGTON, D.C. 20231
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BIBDATASHEET

CONFIRMATION NO. 7327

Bib Data Sheet

SERIAL NUMBER 10/014,705	FILING DATE 12/11/2001 RULE	CLASS 623	GROUP ART UNIT 3738	ATTORNEY DOCKET NO. 1133279-0014
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APPLICANTS

Scott J. Addonizio, Fort Lauderdale, FL;

David L. Camp JR., Hillsboro Beach, FL;
Gary J. Becker, Miami, FL; John D. Pazienza, Pompano Beach, FL;

** CONTINUING DATA *****

This application is a CIP of 09/511,481 02/23/2000, which is a DIV of 09/094,402
THIS APP, which claims benefit of 60/254,688 12/11/2000
 and is a DIV of 09/094,402 06/10/1998 PAT 6,117,165

** FOREIGN APPLICATIONS *****

EUROPEAN PATENT OFFICE (EPO) 97201799.0 06/13/1997
EUROPEAN PATENT OFFICE (EPO) 98201446.6 05/06/1998

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 12/31/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance	FL	DRAWING 12	CLAIMS 42	CLAIMS 6
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

007470
 WHITE & CASE LLP
 PATENT DEPARTMENT
 1155 AVENUE OF THE AMERICAS
 NEW YORK , NY
 10036

TITLE

Stent having helical elements

All Fees



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 WHICH CLAIMS BENEFIT OF 60/254,688 12/11/2000
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35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	FL	12	42	6
Verified and Acknowledged	<i>Yours truly, [Signature] 8/11/03</i> Allowance Examiner's Signature Initials				

ADDRESS

007470

TITLE

Stent having helical elements

FILING FEE RECEIVED 759	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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